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TO: United States Patent and Trademark Office-Amendment

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Fax No. 513-627-8118

Phone No. 513-627-4213

Listed below are the item(s) being submitted with
this Certificate of Transmission:**

Number of Pages Including this Page: 10

1) Petition For Revival of Application Abandoned
Unintentionally 2 pages

2) Fee Transmittal

3) Amendment 6 pages

4)

5)

Comments:

Inventor(s): Eric Tcheou

S.N.: 09/973,518

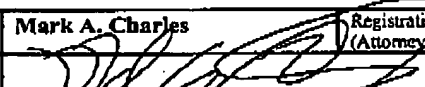
Filed: October 9, 2001

Case: CM2454

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submitted paper.

FEE TRANSMITTAL for FY 2005 Patent fees are subject to annual revision. Effective December 8, 2004	Complete If Known		RECEIVED CENTRAL FAX CENTER JUL 12 2005
	Application Number	09/973,518	
	Confirmation Number	6375	
	Filing Date	October 9, 2001	
	First Named Inventor	Eric Tcheou	
	Examiner Name	Lorna M. Douyon	
	Art Unit	1751	
TOTAL AMOUNT OF PAYMENT (\$) 1500		Attorney Docket No.	CM2454

METHOD OF PAYMENT		FEE CALCULATION (continued)																															
1. [X] The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to: Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company		5. ADDITIONAL FEES JUL 19 2005 Fee Description Fee Paid Extension for reply within 1 st month (Office of Patents) Extension for reply within 2 nd month (\$450) <input type="checkbox"/> Extension for reply within 3 rd month (\$1,020) <input type="checkbox"/> Extension for reply within 4 th month (\$1,590) <input type="checkbox"/> Extension for reply within 5 th month (\$2,160) <input type="checkbox"/> Information Disclosure Statement fee (\$180) <input type="checkbox"/> 37 CFR 1.16(f) Late Oath/Declaration (nonprovisional) (\$130) <input type="checkbox"/> 37 CFR 1.17 (g) Surcharge - Late provisional filing fee or cover sheet (\$50) <input type="checkbox"/> Non-English specification (\$130) <input type="checkbox"/> Notice of Appeal (\$500) <input type="checkbox"/> Filing a brief in support of an appeal (\$500) <input type="checkbox"/> Request for oral hearing (\$1,000) <input type="checkbox"/> Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c) (\$1,370) <input type="checkbox"/> Other: Petition to revive unintentionally abandoned application (\$1500) [X]																															
FEE CALCULATION 2. BASIC FILING FEE - Large Entity <table border="1"> <thead> <tr> <th></th> <th>FILING FEE</th> <th>SEARCH FEE</th> <th>EXAMINATION FEE</th> <th></th> </tr> </thead> <tbody> <tr> <td>Application Type</td> <td></td> <td></td> <td></td> <td>Fee Paid</td> </tr> <tr> <td>Utility</td> <td>(\$300)</td> <td>(\$500)</td> <td>(\$200)</td> <td>(Total = \$1000) <input type="checkbox"/></td> </tr> <tr> <td>Design</td> <td>(\$200)</td> <td>(\$100)</td> <td>(\$130)</td> <td>(Total = \$430) <input type="checkbox"/></td> </tr> <tr> <td>Reissue</td> <td>(\$300)</td> <td>(\$500)</td> <td>(\$600)</td> <td>(Total = \$1400) <input type="checkbox"/></td> </tr> <tr> <td>Provisional filing fee</td> <td></td> <td></td> <td></td> <td>(Total = \$200) <input type="checkbox"/></td> </tr> </tbody> </table>			FILING FEE	SEARCH FEE	EXAMINATION FEE		Application Type				Fee Paid	Utility	(\$300)	(\$500)	(\$200)	(Total = \$1000) <input type="checkbox"/>	Design	(\$200)	(\$100)	(\$130)	(Total = \$430) <input type="checkbox"/>	Reissue	(\$300)	(\$500)	(\$600)	(Total = \$1400) <input type="checkbox"/>	Provisional filing fee				(Total = \$200) <input type="checkbox"/>		
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3. APPLICATION SIZE FEE: Sheets of Spec and Drawings <input type="checkbox"/> (\$250 for each 50 sheets in excess of 100, except for sequence and program listings) SUBTOTAL (2)+(3) (\$) [0]																																	
4. EXTRA CLAIM FEES FOR UTILITY AND REISSUE: <table border="1"> <thead> <tr> <th></th> <th>Extra Claims</th> <th>Fee from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td><input type="checkbox"/> - 20** = <input type="checkbox"/> x</td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Independent Claims</td> <td><input type="checkbox"/> - 3** = <input type="checkbox"/> x</td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Multiple Dependent claims:</td> <td></td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> </tbody> </table> ** or number previously paid, if greater, For Reissues, see below Fee Description Claims in excess of 20 (\$50 per claim) Independent claims in excess of 3 (\$200 per claim) Multiple dependent claim, if not paid (\$360) **Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim) **Reissue claims: each claim over 20 and more than original patent (\$50 per claim) SUBTOTAL (4) (\$) [0]			Extra Claims	Fee from Below	Fee Paid	Total Claims	<input type="checkbox"/> - 20** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>	Independent Claims	<input type="checkbox"/> - 3** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>	Multiple Dependent claims:		<input type="checkbox"/> =	<input type="checkbox"/>																
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SUBTOTAL (4) (\$) [0]		SUBTOTAL (5) (\$) [1500]																															

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Mark A. Charles	Telephone	(513) 627-4229
Signature		Date	July 12, 2005
	Registration No. (Attorney/Agent)		
	51,547		

This collection of information is required by 37 CFR 1.1. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application.